Cha	nge in Company's premium or ra	ate level produced by rate revision effecti	ve <u>8-05-05</u>	
	(1)	A nov	(2) ual Premium	(3) Percent
	Coverage		me (Illinois)*	Change (+or-)**
1.	Automobile Liability		estimated	l
	Private Passenger		<u></u>	
	Commercial			
2.	Automobile Physical Damage			
	Private Passenger			
	Commercial			
3.	Liability Other Than Auto			<u></u>
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire			
10.	Extended Coverage	.	1 207 005	-0.2
11.	Inland Marine - commercial	<u>_\$</u>	1,207,985	-0.2
12.	Homeowners			
13.	Commercial Multi-Peril			
14.	Crop Hail			<u> </u>
15.	Other Line of Insurance			
	Line of insurance			
Doe	s filing only apply to certain terr	itory (territories) or certain classes? If so	o, specify: <u>No</u>	
Brie	f description of filing. (If filing	follows rates of an advisory organization fulti-Policy; deductible changes.	n, specify organization	
	justed to reflect all prior rate cha			
		wel which will result from application of	new rates	
٠.٠	nange in Company's premium ic	ver when will result from application of	now rates.	
	Auto-Owners Insurance Comp	pany		
	rame of company			
		Cy	yndi Reed, Manager	
			rsonal Property Actua	arial Department
3000	04 (6-77)Official Title			
	_			
		DIVISION OF INSURANCE		

Form (RF-3)

DIVISION OF INSURANCE STATE OF ILLINOIS/IDFPR RECEIVED

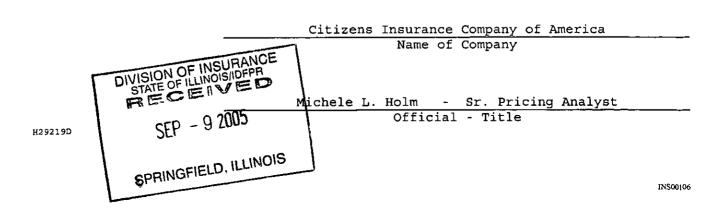
SEP 2 9 2005

SPRINGFIELD, ILLINOIS

Change in Company's	premium or	rate level	produced	by	rate
revision effective					

(1)	(2)	(3)
	Annual Premium	Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage	***	C 05
11. Inland Marine	\$11,333	-6.9%
12. Homeowners 13. Commercial Multi-Peril		
14. Crop Hail	· · · · · · · · · · · · · · · · · · ·	
15. Other		
Line of Insurance		
Does filing only apply to certain If so, specify:	territory (territories)or	certain classes?
Brief description of filing. (If organization, specify organization	filing follows rates of a	an advisory Rules, Forms and
revise LCM's.		

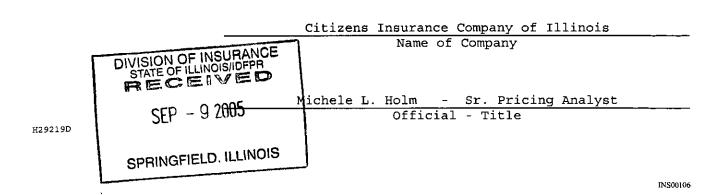
- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.



Change in Company's premium or rate level produced by rate revision effective 01/15/06

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass 6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine	\$2,696	-6.9%
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain If so, specify:	territory (territories)or	certain classes?
		-
Brief description of filing. (If organization		
revise LCM's.		

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.



Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

, , ,	el produced by rate revision effective	1/1/2006
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
. Automobile Liability Private		
Passenger Commercial		
 Automobile Physical Damage Private Passenger Commercial 		
B. Liability Other Than Auto		
Burglary and Theft		
i. Glass		
Fidality		
. Surety		
Boiler and Machinery		
. Fire		
D. Extended Coverage		
1. Inland Marine Commercial _	56,150	-12.9%
2. Homeowners		
		
4. Crop Hail		
	· · · · · · · · · · · · · · · · · · ·	
5. OtherLine of Insurance		
Line of Insurance oes filing only apply to certain territory (te	erritories) or certain classes? If so, specify:	
oes filing only apply to certain territory (te	ites of an advisory organization, specify org	ganization): We are updating our
Line of Insurance roes filing only apply to certain territory (terrief description of filing. (If filing follows races Costs to ISO's filing # CM-2004-RLACE.) Adjusted to reflect all prior rate changes.	ites of an advisory organization, specify org	ganization): We are updating our
Line of Insurance oes filing only apply to certain territory (territory description of filing. (If filing follows races Costs to ISO's filing # CM-2004-RLA	ites of an advisory organization, specify org 1 ich will result from application of new rates.	ganization): We are updating our
Line of Insurance oes filing only apply to certain territory (terrief description of filing. (If filing follows races Costs to ISO's filing # CM-2004-RLA	ites of an advisory organization, specify org	ganization): We are updating our
Line of Insurance roes filing only apply to certain territory (terrief description of filing. (If filing follows races Costs to ISO's filing # CM-2004-RLACE.) Adjusted to reflect all prior rate changes.	ites of an advisory organization, specify or	panization): We are updating our

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

SEP ? 0 2005

SPRINGFIELD, ILLINOIS

Change in Company's	premium	or	rate	level	produced	by	rate
revision effective	01/15/06					. •	

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire		
10. Extended Coverage		
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance	\$385,156	-6.9%
Does filing only apply to certain If so, specify:	territory (territories)or	certain classes?
Brief description of filing. (If organization revise LCM's.	filing follows rates of a): Filing to adopt ISO R	n advisory ules, Forms and
revise bom s.	-	

- * Adjusted to reflect all prior rate changes. ** Change in Company's premium level which will

res	sult from application of n	ew rates.	
		Hanover Insurance Company Name of Company	
H29219D	DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR FR E C E II V E D SEP - 9 2005	Michele L. Holm - Sr. Pricing Analyst Official - Title	
	SPRINGFIELD, ILLINOIS		INS00106

Change in Company's premium or rate level produced by rate revision effective 01/15/06 _____.

(1)	(2)	(3)
	Annual Premium	Percent
Coverage	Volume (Illinois) *	Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine	\$307,833	-6.9%
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other	***	
Line of Insurance		
Does filing only apply to certain	territory (territories)or	certain classes?
If so, specify:		
<u> </u>		
Brief description of filing. (If	filing follows rates of a	n advisory
organization, specify organization	n): Filing to adopt ISO R	ules, Forms and
revise LCM's.		
<u> </u>		

- * Adjusted to reflect all prior rate changes.

 ** Change in Company's premium level which will result from application of new rates.

		Massachusetts Bay	Insurance Company
	DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR	Name of	Company
H29219D		tichele L. Holm -	Sr. Pricing Analyst - Title
11 24	SPRINGFIELD, ILLINOIS]	

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level	produced by rate revision effective	1/1/2006
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
Liability Other Than Auto	-	
5. Glass		
6. Fidelity		
7. Surety		
10. Extended Coverage	FF 000	40.00/
12 Homonymore	55,000	12.9%
13 Commorcial Multi Paril		
44 O 11-9		
15. Other	2.000	•
Line of Insurance		
Does filing only apply to certain territory (terri	tories) or certain classes? If so, specify:	No
Brief description of filing. (If filing follows rate	s of an advisory organization, specify org	nanization): We are revising our
Loss Costs to ISO's filing # CM-2004-RLA1		•
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	will result from application of new rates.	
	Monroe Gua	ranty Insurance Company
		ame of Company
	Dua	ne Willis, Actuary
DIVISION OF INSURA STATE OF ILLINOIS/IDE RECEIVE		Official – Title
SEP 2 0 2005		
SPRINGFIELD, ILLII	NOIS	

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent <u>Change (+ or -)**</u>
Automobile 1: 199 D: 1	·	
Automobile Liability Private Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
Liability Other Than Auto		
Burglary and Theft	· · · · · · · · · · · · · · · · · · ·	
Class		
Eidolitu	<u> </u>	
Curetia		
Boiler and Machinery		
Fire		
) Evended Courses		
I. Inland Marine Com West Cod	0	-12.9%
2. Homeowners		
Commercial Multi Daril		
l. Crop Hail		
Other		
Line of Insurance		•
pes filing only apply to certain territory (terr	itories) or certain classes? If so, specify	: <u>No</u>
rief description of filing. (If filing follows rate	es of an advisory organization, specify or	rganization): We are revising our
ess Costs to ISO's filing # CM-2004-RLA1		_
djusted to reflect all prior rate changes.		
Change in Company's premium level which	n will result from application of new rates	S.
	National 1	Frust Insurance Company
		Name of Company
	Du	ane Willis, Actuary
		Official – Title



(1) Coverage Coverage Coverage Annual Premium Volume (Illinois)* Percent Volume (Illinois)* 1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine - commercial 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS SPRINGFIELD, ILLINOIS SPRINGFIELD, ILLINOIS SPRINGFIELD, ILLINOIS SPRINGFIELD, ILLINOIS SPRINGFIELD, ILLINOIS	Char	ige in Company's premium o	or rate level produced by rate revision of	effective <u>8-05-05</u>	
Coverage Volume (Illinois)* Change (+or.)** 1. Automobile Liability estimated Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine - commercial 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/RIDEPER Personal Property Actuarial Department		(1)			
Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine - commercial 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy: deductible changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/DEPE Personal Property Actuarial Department SEP 2 9 2005 Form (RF-3)		Coverage			Change (+or-)**
Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine - commercial 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. **Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINO(S)/DEPR Personal Property Actuarial Department SEP ? 9 2005 Form (RF-3)	1.			estimat	ed
Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine - commercial 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/DEPR Personal Property Actuarial Department SEP 9 2005					
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine - commercial 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR PERCES VED SEP ? 9 2005	2.	Private Passenger	age		
4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine - commercial 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. *Adjusted to reflect all prior rate changes. *Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR PRECENSED SEP ? 9 2005	3.			· · · · · · · · · · · · · · · · · · ·	
5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine - commercial 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. **Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR PERCENVED SEP ? 9 2005					
6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine - commercial 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. *Adjusted to reflect all prior rate changes. *Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR FIECE IVED SEP ? 9 2005 Form (RF-3)		U ,			
7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine - commercial 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR PERSONAL Property Actuarial Department SEP 2 9 2005 Form (RF-3)					
8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine - commercial \$833,614 -0.2 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR Personal Property Actuarial Department SEP 2 9 2005					
9. Fire 10. Extended Coverage 11. Inland Marine - commercial \$833.614 -0.2 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR FIECE IVED SEP ? 9 2005 Form (RF-3)					
10. Extended Coverage 11. Inland Marine - commercial 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other					
11. Inland Marine - commercial 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR		Extended Coverage			
13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. *Adjusted to reflect all prior rate changes. *Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEBBEED SEP ? 9 2005	11.		ıl	\$833,614	-0.2
14. Crop Hail 15. Other	12.	Homeowners			·····
Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEBYED SEP ? 9 2005	13.	Commercial Multi-Peril			
Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDFPR RECEIVED SEP ? 9 2005	14.	Crop Hail			
Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEBBEED SEP ? 9 2005	15.				
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Increase discounts for Cumulative Multi-Policy; deductible changes. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Owners Insurance Company Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDFPR PRECES VED SEP 2 9 2005 Form (RF-3)		Line of Insurance			
Name of Company Cyndi Reed, Manager Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED SEP ? 9 2005 Form (RF-3)	Brief Incre	f description of filing. (If fil ase discounts for Cumulativ justed to reflect all prior rate	ing follows rates of an advisory organice Multi-Policy; deductible changes.	zation, specify organizat	ion):
Personal Property Actuarial Department DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR SEP 2 9 2005 Form (RF-3)			ny		
DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR SEP 2 9 2005 Form (RF-3)					
SEP ? 9 2005	3000	4 (6-77)Official Title			
Form (RF-3)		ſ	DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED		
			SEP % 9 2005		
	Form	n (RF-3)	SPRINGFIELD, ILLINOIS		

Change in Company's premium or rate level produced by rate revision effective October 1, 2005 New; November 15, 2005 Renewal.

	(1) Coverage	(2) Annual Premium Volume (Illinois)#	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		· · · · · · · · · · · · · · · · · · ·
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft	\$132,900	-10.3%
5. 6. 7.	Glass Fidelity Surety DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR STATE OF ILLINOIS/IDEPR		
8.	Boiler and Machinery		
9.	Fire - commercial SEP - 8 2005	\$11,435,200	-9.3%
10. 11.	Extended Coverage Inland Marine - COMMARCIAL	\$ 4,225,000	-4.0%
12.	Homeowners SPRINGFIELD, ILLINOIS	\$ 4,223,000	-4.0%
13.	Commercial Multi-Peril	·	
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	filing only apply to certain territory (terrify: Yes, see attached filing letter.	ritories) or certain cl	asses? If so,
	f description of filing. (If filing follows nization): See attached filing letter.	rates of an advisory o	rganization, specif
**Ch	justed to reflect all prior rate changes. ange in Company's premium level which will sult from application of new rates.		·

PEKIN INSURANCE COMPANY
Name of Company

Official - Title

R.M. McGann - Directory of Pricing & Regulatory Filings, Assistant Secretary

	Change in Company's premium	October 4, 2005		
		(0)	(0)	
		(2)	(3)	
		Annual Premium	Percent	
		Volume (Illinois)	Change (+ or -)	-
1.	Automobile Liability			
	Private Passenger			_
	Commercial			_
2.	Automobile Physical Damage			
	Private Passenger			_
	Commercial			_
3.	Liability Other Than Auto			_
4.	Burglary and Theft			_
5.	Glass			_
6.	Fidelity			
7.	Surety			_
8.	Boiler and Machinery			
9.	Fire	 		-
10.	Extended Coverage			-
11.	Inland Marine OU 50 NOL	N/A	N/A	-
12.	Homeowners			
13.	Commercial Multi-Peril			=
14.	Crop Hail			-
15.	Other Ocean Marine	N/A	N/A	-
	Line of Insurance			-
Doe	s filing only apply to certain territory	(territories) or certain cla	sses? If so, specify:	No
Dela			:	:A:\.
	description of filing. (If filing follow			ization):
Intro	duction of a new program for ATV,	snowmobile, goir cart, an	d watercraft.	·
	50			
	DIVISION OF INCLES		Property and (Casualty Ins. Co. of Hartford
	DIVISION OF INSURAL	NCE	r roperty and t	ame of Company
	STATE OF ILLINOIS/IDEF	<u> </u>	IN	arrie of Company
		G	Miles Come	Digitally algred by Michael Concennon DN ch-Michael Concennor, aut/3, p-The Hantons, ou-Personal
	SEP 2 6 2005	1	Julia Comer	DN considerant Concentron (audit, ou The Hantlord, our-Personal Lines, emailemiches) concentron & Inshantlord, com Date: 2005 09 19 10 54 06 -04/00*
	SEP 2 6 2005	1		Official Title
		1		Official - Title
	SPRINGFIELD, ILLINOIS	1		
	L. ILLINOIS	s 1		
		- 1		

	Change	in Company's premium	or rate level	produced by r	ate revision effective	March 1, 2006
			40)		(0)	
			(2)		(3)	1
			Annual Pr		Percent	
4	A 1. 11		Volume (ilinois)	Change (+ or -)	•
1.	Automobil					
		assenger				_
2	Commer					_
2.		e Physical Damage				
		assenger				_
2	Commerc					_
3.		ther Than Auto			 	-
4.	Burglary a	na ineπ				_
5.	Glass					_
6. 7	Fidelity			*****		-
7.	Surety	Mashinas				<u>-</u>
8.		Machinery			-	_
9.	Fire	Ca				-
10. 11.	Extended		N/A		N/A	<u>-</u>
12.	Inland Ma Homeown		IN/A		IN/A	-
13.		ers 1 al Multi-Peril				-
13. 14.		ai Mulli-Perii				-
15.	Crop Hail Other Oce	an Marina	N/A		N/A	-
15.	Other Oce	Line of Insurance	- IN/A		IN/A	-
		Line of insurance				
Doe	s filing only	apply to certain territory	(territories) o	r certain class	ses? If so, specify:	No
000	o ming only	apply to contain tornion	(10111101100)		300. II 00, opoony.	
Brief	f description	of filing. (If filing follow	s rates of an	advisorv orga	nization, specify organ	ization):
		new program for ATV,				
			,			
						1
	Sentinel Insurance Company, LTD.					
Na					ame of Company	
DIVISION OF INSURANCE Julian Containing the first instituted downwards of the first instituted down down down downwards of the first instituted down down downwards of the first instituted downwa					Digitally signed by Michael Concennon	
	Γ-	DIVISION OF INSU	BANCE		Julant Common	DN: cn-Michael Concention, cn-US, c-The Hartford, ouePersonal Lines, email-michael concention if thetrettord com Carle 2008 01 19 10 48 45 - 0.477
	[STATE OF ILLINOIS/	IDFPH			
		RECEIV	ED			Official - Title
		SEP 9 6 201	n 5			
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SPRINGFIELD, ILLINOIS